

**An Evaluation of a Work Continuation Policy for Pregnant Employees
at
Broward County Fire Rescue**

Executive Development

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Appendices B through H Not Included. Please visit the Learning Resource Center on the Web at <http://www.lrc.fema.gov/> to learn how to obtain this report in its entirety through Interlibrary Loan.

Abstract

The problem was the current pregnancy policy developed for the Broward County Fire Rescue Division has not been utilized by all eligible employees. The purpose of this study was to evaluate the existing policy and analyze it for weaknesses and then to develop recommendations for improving the policy so that it would be more widely utilized by the employees. This was a descriptive, evaluative and action research project. The research questions were:

1. How was the existing pregnancy policy developed at Broward County Fire Rescue?
2. What limitations in the policy have discouraged participation by eligible employees?
3. What role does employee counseling play in utilization of the policy?
4. What improvements can be made to insure maximum utilization of the policy?

The procedures involved conducting a comprehensive literature search on the topic of pregnancy in the fire service and what recommendations exist for pregnancy policies. Two survey instruments were created to gather information pertinent to the research questions. The first survey, *Survey of Fire Department Pregnancy Policies* was distributed to 116 fire rescue departments throughout the United States. The purpose of this survey was to see what policies currently exist, and what role counseling plays in employees' utilization of the policy. The second survey, *Survey of Female Firefighters and Paramedics*, was conducted of 43 female employees of the Broward County Fire Rescue Division. This represented the entire pool of

female firefighters and paramedics in the division. The purpose of the survey was to evaluate the current pregnancy policy, investigate the possible reasons for non-participation in the policy, and seek input for improving the policy. The responses to the surveys were tabulated and are shown in the Appendices.

The results of the first survey indicated that only 44.3 % of the fire departments responding actually had written policies dealing with pregnant employees. Of those that did, 38.4 % indicated that they conducted some form of counseling of the employees with regard to the risks of firefighting while pregnant.

The results of the employee survey indicated that employees are discouraged from utilizing the pregnancy policy primarily because of the limitations of the light duty schedule. Four respondents did advise that they would have accepted a light duty assignment if they had been fully aware of the hazards earlier in their pregnancy.

The recommendations of this study were for Broward County Fire Rescue to incorporate the pregnancy policy into its Operations and Procedures Manual. The policy should contain a comprehensive summary of potential reproductive hazards and job related risks for the pregnant employee. Counseling should be personally conducted with pregnant employees by the fire rescue medical director. In addition, this information should be provided to all new hire employees. A draft of the recommended policy is included in Appendix H. In addition, the fire rescue division should develop alternative light duty schedules which would encourage greater utilization of the policy.

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INTRODUCTION

Today's fire service is a considerably more diverse work place than it was one hundred years ago, or even fifty years ago. The traditional all-male work environment has, in most instances, been drastically altered. In 1999, the organization Women in the Fire Service, Inc. published the document *Many Women Strong - A Handbook for Women Firefighters* (1999a) for the United States Fire Administration (USFA). According to its status report on women firefighters, today more than 4,500 women hold career-level fire suppression positions in more than 900 U.S. fire departments. Unfortunately, nationwide this represents only about 2% of all professional firefighters. These numbers do not take into account the thousands of women who work as emergency medical technicians (EMT) and paramedics. The result is that the fire service is becoming increasingly diverse throughout the U.S. Along with such diversity come issues that the fire service has traditionally not had to deal with. Issues such as non communal sleeping and showering facilities have forced changes in the design of fire stations. One of the most pressing human resource issues facing the fire service today is that of the pregnant fire fighter. This is an issue which represents a completely new arena for many fire service managers. In many cases, fire rescue departments have just chosen to ignore the issue, while others have made poorly conceived (albeit well intentioned) policies to deal with the pregnant firefighter. Broward County Fire Rescue (BCFR), in an effort to address this issue, developed a policy for pregnant employees which was felt to be proactive, well-developed, and sufficiently flexible to encourage participation by pregnant firefighters and paramedics.

The problem is the current pregnancy policy at Broward County Fire Rescue has not been utilized by all eligible employees who have become pregnant since its implementation. The

purpose of this applied research project was to evaluate the current pregnancy policy, analyze it for weaknesses, and make recommendations for improvement. This paper used the descriptive, evaluative and action research methodologies to answer the following research questions:

1. How was the existing pregnancy policy developed at Broward County Fire Rescue?
2. What limitations in the policy have discouraged participation by eligible employees?
3. What role does employee counseling play in utilization of the policy?
4. What improvements can be made to insure maximum utilization of the policy?

BACKGROUND AND SIGNIFICANCE

Broward County Fire Rescue (BCFR) was formed as a result of the consolidation of a third-service, county-operated Emergency Medical Services (EMS) division and the county's fire protection division. Prior to the consolidation, the EMS division employed primarily single certified paramedics. The consolidation took place in 1990, resulting in a fire rescue division which was comprised of some dual certified firefighter-paramedics, some single certified firefighters and some single certified paramedics. At the time of the merger, there were only three female firefighters in the fire protection division. The EMS division however, had a large number of mostly single certified female paramedics. Over the past eleven years, most of these employees have become dual certified firefighter-paramedics. Today, the Broward County Fire

Rescue division has a total of 409 uniformed employees, 43 of whom are female firefighters and/or paramedics (of those 43, twelve remain single certified paramedics.) Females thus represent 10.5 % of the entire fire rescue division's workforce, a significantly higher percentage than the national average of 2%.

Prior to the consolidation neither the EMS nor the fire protection division had any written policy regarding pregnant employees. While none of the three female firefighters became pregnant prior to the consolidation, there were a large number of the paramedics who had been pregnant and were, in almost all instances, forced to work throughout their pregnancy in the field. There was no opportunity at that time for employees (male or female) who suffered an off-the-job temporary injury or disability to work an alternate or "light duty" assignment. The paramedics worked twenty-four hour shifts, with two days off. Most of the employees worked throughout their pregnancy so that they could conserve their annual and sick leave to use after the birth of their child. In 1993, the newly appointed fire chief was dismayed when he showed up on an emergency medical call and found an almost full-term pregnant paramedic attending to a patient. At that moment, the chief set out to provide a suitable alternative for the employees.

In 1994 this author, as a member of the department's joint labor-management safety committee was tasked by the fire chief with researching and developing a policy for pregnant employees. In place since May 1996, the policy has been utilized by several employees. The policy was a significant step forward for the division and was viewed by most employees (both male and female) as long overdue. The development of the original policy involved conducting a very informal phone poll of local fire departments to determine what, if any, policies existed in South Florida at that time. In addition, female employees who had experienced pregnancy while employed as paramedics were interviewed for input regarding the development of the policy.

Considerable anecdotal information from the employees was included, along with pertinent research information, in a report presented to the fire chief and the safety committee. Employees related numerous instances of problems encountered while working emergency field assignments while pregnant. Among the incidents related by paramedics who had been pregnant were: exposures to hazardous fumes, a suspected rib fracture sustained when a combative patient threw the medic against an ambulance wall, a fall injury from loss of balance while climbing into an ambulance, and a flight medic who suffered a syncopal episode while in-flight on the rescue helicopter. (McAllister, 1994) This last instance in particular is notable, as the medic was in her third trimester. Fire rescue personnel who may have duties related to air rescue are especially challenged by the physical limitations of pregnancy. Gehrke and Scott (1994) note “Unlike other aspects of health care, emergency air medical care is unforgiving of physical conditions that require modification in practice” (p.60).

In the development of the original draft policy it was determined that the employee must immediately notify the chief of her pregnancy. The employee would then receive counseling and she would be offered a light duty assignment. Based on the research conducted at the time, it was understood that the employee could not automatically be removed from her emergency assignment. With certification of fitness for duty provided by the employee’s obstetrician, the policy allowed the employee to continue in her field assignment. However, it was believed that there was sufficient evidence of safety concerns to justify reassigning the employee to light duty at the onset of the third trimester. Once the policy received preliminary approval from the fire chief, the Broward County Attorney’s office was asked to review the draft policy to ensure compliance with all pertinent laws. Mr. G.B. Johnson, Assistant County Attorney, in a memorandum to the fire chief dated August 18, 1995, gave a comprehensive legal opinion of the

draft policy. A number of problems were found with the draft. The provision which required the employee to be mandatorily assigned to light duty at the onset of the third trimester was particularly troublesome. Attorney Johnson wrote:

The concerns expressed in the factual background above will not justify the policy. The reason is that these concerns go to the safety of the unborn fetus and pregnant worker. It is understood the reason for the policy is to protect both the unborn fetus and pregnant worker from potentially harmful working conditions, i.e. hypothermia, poisonous toxins, physical stress, etc. However the safety of the unborn fetus must be left to the parents who conceive, bear, support, and raise them rather than the employer who hires the parent. Id. at 374. Further, the court in Johnson Controls specifically held that consideration of the pregnant worker's exposure to adverse working conditions could not justify the policy. Therefore, the Division's desires to protect the unborn fetus and the pregnant worker are not permissible bases to support the policy.

In our well-intentioned zeal to protect the fetus and the employee both, it seemed that we were in jeopardy of violating all the pertinent legal standings of the time. With direct participation of the county attorney's office, the policy was revised, with all mandatory reporting and reassignment provisions removed. The policy was finally adopted in 1996 and presented as a fire rescue division General Order, *Work Continuation Policy for Pregnant Field Personnel*. A copy of the policy, with the accompanying medical release form is shown in Appendix A. One of the hallmarks of the current policy was that it was now entirely voluntary. The policy encourages, but does not require, that the employee notify the chief upon learning she is pregnant. At such

time as the employee wishes to make that notification, a packet of relevant information is provided to the employee to inform her of her rights, and the reproductive hazards associated with emergency field assignments. This constitutes the extent of the employee counseling. The employee is encouraged to share the information with her private physician, to help them make the appropriate decision. If the employee wishes to continue in her field assignment, a medical release form is completed by the physician. If the employee wishes to accept an alternate duty assignment at any time during the pregnancy, she will be reassigned to division headquarters for the duration of the pregnancy. Based on the opinions expressed by employees during the development of the policy, the author made an assumption (premature as it happens) that all female firefighters and paramedics, given the option when pregnant, would immediately accept a light duty assignment.

The significance of this research for the organization is clear. Since the inception of BCFR's *Work Continuation Policy for Pregnant Field Personnel*, a number of employees have become pregnant. Not all of these eligible employees, however, chose to use the policy. At least two women continued to work well into the third trimester and did not request a light duty assignment. In addition, some employees who did utilize the policy waited until their second or even third trimester before accepting a light duty assignment. This study was undertaken with the purpose of reevaluating the existing policy and determining what elements of the policy discouraged utilization, and to recommend changes. As the informational materials which describe the potential reproductive hazards of firefighting duties are not provided until an employee chooses to inform the division of her pregnancy, it was felt that counseling was an area that needed particular study.

The significance of this research for the Fire service as a whole is evident. Fire

departments need to address the human resource issues related to pregnancy and reproduction. Those departments that have no policy in place are doing their employees and their organization a great disservice, and may be exposing the organization to possible E.E.O.C complaints. For those fire departments that do have some type of pregnancy policy in place, they would do well to reevaluate the policy for any problem areas.

During the Executive Development class held at the National Fire Academy in January 2001, the unit entitled Legal Issues dealt with topics related to Equal Employment Opportunity and sex-based discrimination and the need for fire departments to be aware of their responsibilities in these areas.

LITERATURE REVIEW

The purpose of this literature review was to gather a body of information relevant to the research study questions. Numerous articles and publications provided support for the first question, “How was the existing pregnancy policy developed at Broward County Fire Rescue ? ”.

A review of how Broward County’s existing pregnancy policy was developed is crucial to evaluating its effectiveness and determining why it has not encouraged full participation. In 1994, Broward County Fire Rescue had no policy in place to accommodate a pregnant firefighter or paramedic. At that time, a research project was undertaken to develop a policy for the division. BCFR, like many fire rescue agencies, was struggling with human resource issues arising out of the growing diversity in the fire service. Despite the increased presence of women in the fire service, few fire departments were being proactive in the development of reproductive policies.

According to Templeton (1992), “The fire service does not have a long history of developing policies on issues important to over one-half of the American workforce - women” (p.116).

BCFR looked at two primary areas of concern when drafting its current policy - the reproductive hazards facing the employees and the legal issues facing the county.

Research into the reproductive hazards associated with firefighting was the foundation for the development of BCFR’s current pregnancy policy. A number of studies published in the 1990's pointed out a variety of chemical, physical, environmental and even psychological hazards which may represent a risk to a pregnant woman. Most of the studies were not specific to the fire service, but nevertheless represented hazards that are routinely faced by firefighters. Two notable exceptions were studies published in the American Journal of Industrial Medicine in 1991 which examined reproductive hazards as they relate specifically to firefighting. McDiarmid, Lees, Agnew, Midzenski, and Duffy (1991) examined the toxic products of combustion encountered by firefighters and how such chemical hazards could adversely affect the reproductive health of both male and female firefighters. In a companion study, Agnew, McDiarmid, Lees and Duffy (1991) focused on a number of non-chemical hazards including heat, noise, physical exertion and psychological stress. Heat stress in particular has been suspected of having deleterious effects on fetal development. Studies suggest that maternal hyperthermia, particularly in the first trimester may have a teratogenic role, particularly in the occurrence of neural tube defects (Milunsky, Ulcickas, Rothman, Willett, Jick and Jick, 1992). Agnew et al. note that the increase in core body temperature experienced by firefighters when wearing impermeable turn out clothing and SCBA could pose a risk to a developing fetus.

Environmental factors to which firefighters are exposed may also negatively affect a developing fetus. Noise, in particular, is a common feature of the firefighting environment which

may include sirens, air horns, vehicle noise, and auxiliary power equipment (Agnew et al., 1991).

Hu and Besser (1993) note that there is evidence that sound is well transmitted into the fetal environment. They state that “there is a theoretical basis for anticipating that noise can affect reproductive physiology and fetal development” (p.226).

The work schedule of firefighters can be disruptive to a normal adult, with schedules varying from twenty-four hour shifts to alternating 10 hour and 14 hour schedules, to “swing shifts” which may be of any configuration. Add to this the frequent disruptions in sleep cycles occurring during a normal firefighting shift, and a pregnant firefighter may suffer unusual physiological stress. Some researchers have suggested that shift work may have deleterious effects on a fetus. Basso, Bisanti, Karmaus, Olsen, and Thonneau (1996) found that:

Shift work has been associated with various unfavorable pregnancy outcomes (i.e. pregnancy loss, spontaneous abortion, low birth weights, etc.). The suggested underlying mechanism is the interference of shift work with the circadian regulation of human metabolism and, in particular, with the temporal pattern of endocrine function. (p.352)

Clearly, the literature supported the development of BCFR’s current pregnancy policy in terms of the scope of information on reproductive hazards in the fire service. Reprints of the two studies published in the American Journal of Industrial Medicine are, in fact, included in the informational packets given to division employees who become pregnant.

The second area of research conducted during the development of the policy dealt with the legal constructs of such a policy. Regardless of how exhaustive such research may be, there is no substitute for professional legal advice. It is a key component to the development of any fire department pregnancy policy. This was certainly the case with the first draft of the BCFR policy.

Many of the written pregnancy policies currently in use by fire departments appear to be based on questionable interpretations of recent legal rulings. In a review of his own department's pregnancy policy, Tillson (1995) noted: "The City of Boca Raton Fire Department had a policy which required a pregnant firefighter to notify the department administration as soon as pregnancy was diagnosed. The employee was then assigned to nonhazardous duty. This policy was in conflict with Title VII of the Civil Rights Act of 1964 as amended by the Pregnancy Discrimination Act of 1978.(PDA)" (p.1). The importance of evaluating pregnancy policies for any possible violations of the PDA cannot be understated. Fire departments must insure that their policies do not expose them to potential litigation. This idea is reinforced by author Schneid (1996) who advises, "Prudent fire departments should be aware of all the applicable federal and state laws regarding discrimination, know the requirements of each and ensure the department is in compliance" (p.74). Shults (1990) reinforces the need for employers to evaluate their policies: "Reproductive health issues are a growing concern for many companies. Safety and health policies and procedures need to be reviewed carefully to ensure that non-discriminatory methods are used in both risk assessment and risk management" (p.56).

The basis for the development of most pregnancy policies is the Pregnancy Discrimination Act (PDA). The act prohibits discriminating against an employee simply because she is pregnant or suffering a pregnancy-related condition. Pregnant women who are able to work must be permitted to do so, on the same conditions as other employees. The E.E.O.C, in its fact sheet *Facts About Pregnancy Discrimination* (January 1992) points out that an employee who is temporarily unable to perform her job duties must be treated the same as any other temporarily disabled employee. This may include providing modified job tasks, alternative duty assignments, disability pay or leave without pay. In the case of the fire department, if a department policy

provides an alternative work assignment for a firefighter who suffers a non-job related injury or illness, but not for a pregnant firefighter, the policy is illegal. “Refusing light duty to a pregnant female while permitting it for physically injured firefighters, male and female, is probably the most common example of a violation of the federal pregnancy anti-discrimination statute” (*Pregnancy and light duty in the fire service*. 1995, p.2).

A question naturally arises, “what if the fire department has no light-duty policy in place for any employee?”. Does the PDA require that an employer provide such assignment for a pregnant employee? According to Linda Willing, Associate Editor for Women in the Fire Service, Inc. (1997) the answer is no. The PDA does not require the establishment of such policies where none existed before. However, a notable Supreme Court decision in *California Federal Savings and Loan Assn. V. Guerra* [U.S. Sup.Ct. 85-494] which was handed down on January 13, 1987 clarified the PDA by ruling that an employer may in fact provide pregnancy benefits greater than those provided for other off-the-job disabilities or injuries. For fire departments, this would mean that the department could offer a non-hazardous duty assignment to a pregnant firefighter even when no such assignment is available to firefighters injured off-duty. To avoid the possibility of contentious labor issues, however, it is probably in the department’s interest to offer such assignments to all employees either voluntarily, or through collective bargaining.

Another landmark case heard by the Supreme Court was *UAW v. Johnson Controls*. This case involved a company which manufactured lead batteries. In 1982 it instituted a fetal-protection policy that prohibited all women who might be pregnant or even capable of child bearing from working in jobs where they may be exposed to lead. The policy went so far as to require that only women supply documentation that they were incapable of child bearing before

they would be permitted to work certain jobs (Templeton, 1992). The lower court found in favor of the company, claiming it was a “business necessity”. The appeals court upheld the judgement citing the “bona fide occupational qualification” (BFOQ) standard, and agreeing that the fetal protection policy was supported by the industrial safety concerns of the company (Berkman, 1997). The Supreme Court overturned the lower court rulings and found that such sex-specific fetal protection policies were in fact sex discrimination under the PDA. In the Johnson Controls opinion, the court rejected the employer’s argument that gender was a BFOQ for the job of battery maker. The court limited the “safety BFOQ” only to instances where sex or pregnancy actually interferes with an employee’s ability to perform her job duties (Berkman, 1997).

The contentious issue, of course, arises when determining exactly when a firefighter is unable to perform her essential job duties. It could be reasonably argued that during the early stages of pregnancy most women are no more restricted in their physical abilities than a male employee who has gained an excess amount of weight. (Ironically, however, it is during these earliest months that the fetus is most at risk to the toxic hazards of firefighting duties). Templeton (1992) offers a fairly simple answer to the question “at what point must a pregnant paid firefighter give up field operations?”. He notes the PDA states: 1) when she wants to or 2) when she can no longer perform her job safely and efficiently, whichever comes first (p.118). The question is how does a fire department determine at what point the firefighter can no longer perform her job efficiently and safely? Templeton points out that the only true objective measure is a physical agility test or equivalent. Fire departments might be tempted to try and employ the BFOQ standard in claiming that a pregnant firefighter poses a danger not to herself or her fetus (which *UAW v. Johnson Controls* showed was not justification for mandatory reassignments), but rather to the public which she serves. Panicia (2000), discussing discrimination in the workplace

on an Internet discussion group, is asked by the moderator if an employer has the right to reassign a woman to a different position, simply because the employer feels the job is too dangerous for a pregnant woman. Paniccia responds:

The decision of whether or not a job is too dangerous for a pregnant woman is the woman's decision. There are only two exceptions when an employer can reassign a woman because she's pregnant - one if the pregnancy renders her unable to do her job. In answer to your question - the safety exception, when the job becomes too dangerous for the woman. This occurs if her presence on the job could be a danger to others; not necessarily her own. If she's a firefighter, and she can't hold the hose because of her pregnancy, that might jeopardize the people in the fire as well as her co-workers. In that instance, an employer can say that the woman is posing a safety threat - they can't say that she's posing a safety threat to herself.

This may be the interpretation of a lay person, but it certainly raises the question of safety concerns for the fire department who may have a firefighter working in suppression duties in the late stages of pregnancy. Fire departments may be tempted, based on a concern for public safety, to make a "blanket policy" that prohibits the firefighter from working in the field at some specified point, but as BCFR found during the development of its policy, this may not be defensible. Such departments would do well to heed the warning "whether a fire service agency could convince a court that the public or the unborn fetus is put at risk by continuing to allow a pregnant firefighter to perform general fire suppression duties is an open question" (*Pregnancy and light duty in the fire service*. 1995, p.3). An acceptable solution would be to make sure that the policy speaks only to observed performance deficiencies, rather than assumptions about what

a pregnant firefighter may or may not be able to do. It is at this point that a fire department's medical director (if there is one) should offer guidance. Very often the employee's private physician may not fully appreciate all the demands and hazards of firefighting and thus may not be making an informed decision about how long a woman can safely perform her fire service duties. It is important therefore that fire departments develop a standard release form which specifically outlines all the requirements of the job (Women in the Fire Service, Inc. 1999b). If the form given to the employee's physician has sufficiently detailed description of the job duties and risks, most prudent obstetricians are going to decline permitting their patient to continue full fire suppression duties. The department's medical director may need to intervene if there are observed, documented performance deficiencies and require a medical re-evaluation.

The current Broward County Fire Rescue *Work Continuation Policy for Pregnant Field Personnel* incorporates language which also allows for intervention by the county physician if necessary:

Any questions regarding the employee's fitness for field duty shall be based upon observed performance deficiencies or problems and shall be decided by the employee's physician, with due regard for the safety of the employee, the child, and other affected crew members. The County may require a medical release form from the employee's physician as a condition for permitting the employee to remain in a field assignment and may require consultation with a county physician.

The publication *Many Faces, One Purpose - A Manager's Handbook on Women in Firefighting* was prepared by Women in the Fire Service, Inc. (1999b) for the United States Fire Administration and provides a comprehensive summary of the reproductive hazards and legal issues which must be considered in the development of a fire department pregnancy policy. The

publication, which can be obtained directly from the USFA, is a must have for today's fire service managers.

In evaluating BCFR's current policy, it was examined for weaknesses which may have discouraged participation by eligible employees. In order for any fire department to insure the maximum utilization of their pregnancy policy, it is important to do such an analysis and attempt to mitigate the factors that discourage participation. One feature of the current BCFR policy which appears to discourage participation is the work schedule. The only light duty assignments which have been available are on a 40-hour, five day work week. BCFR firefighters and paramedics currently work a 24-hour shift every third day, with a "Kelly Day" every seventh shift. This translates to five days off every three weeks. Very few firefighters and paramedics ever voluntarily give up that schedule. Templeton (1992) notes that the employer can help encourage an employee to accept a light-duty assignment by keeping other options open : "Be flexible in the alternative duties you make available. Remember the concept of harm and remember that honey draws more flies than vinegar. You need the firefighter's cooperation" (p. 120). He also notes that another discouraging feature of some pregnancy policies can be eliminated by insuring the firefighter's current field assignment is held open . Communicating the exact terms of any temporary transfer is key to reassuring the pregnant firefighter.

Employee counseling is another key component of any pregnancy policy. The role that counseling plays in an employee's decision to accept a light-duty assignment must not be overlooked. While employers are prohibited from making involuntary light duty assignments simply for the purpose of protecting the fetus, it is incumbent upon the employer to explain any potential hazards that the job presents. Then the employee may make an informed decision regarding when, and if, she should accept a light duty assignment. The publication *Many Women*

Strong - A Handbook for Women Firefighters states that “The fire department should provide education as part of its reproductive safety policy. All employees must understand the hazards firefighting poses to their reproductive health” (Women in the Fire Service, Inc. 1999a, p.39). Faced with the conflict between risking violating federal discrimination laws and risking the safety of employees and the public, the prudent fire chief will make employee counseling a top priority. Making a case for such counseling of employees, Templeton (1992) suggests “The key to solving this conflict is communication. Explain to a pregnant firefighter your perception of the risks she is taking for herself and the fetus. Listen to her reasons for wanting to continue in firefighting duties. If you can design some accommodation that will alleviate her concerns, do it” (p.118). While the counseling provided to the employee is critical, it is also important that the information is related to the employee’s physician. It is extremely important that the employee communicate the hazards of her working conditions to the physician. This is necessary for the physician to fully monitor the pregnancy as well as to make an informed decision about the employee’s ability to perform her job (Shults, 1990). Often, employees who do not want to be reassigned to light duty may minimize the risks associated with their job when seeking physician approval. This is why the medical release form developed by the fire department must be as complete as possible.

In determining what improvements can be made to the current BCFR pregnancy policy, the literature offers some guidance. To insure the development of a sound pregnancy policy that will meet the needs of both the employee and the department, there are several concerns that should be addressed by the employer. Templeton (1992) notes that there are certain steps which fire service managers should take to insure that any pregnancy policy limits the department’s liability. Among the most important steps are the following:

- Warn the pregnant firefighter orally and in writing against all known hazards she might encounter. Be as specific as possible. Any future defense you might have to present will hinge on the adequacy of your warning. The variety of fire service calls for assistance complicates the potential hazard possibilities and makes a complete warning statement difficult to construct.
- Be certain to get the firefighter's dated signature that she has read and understood both the policy and the potential-danger statement.
- Offer temporary "maternity light duty" for the full term of the pregnancy. Don't require the firefighter to take leave to protect her fetus from firefighting hazards. Make it easy for her to get off the fire truck or ambulance without using up the leave she's planning to enjoy with her new baby.

The area of counseling is clearly one area where BCFR's policy can be improved. As Templeton states, it is important to warn the employee both in writing and orally. Currently, employees are only given a packet of informational material and encouraged to share the information with their physician. There is no direct, one-to-one counseling. The International Association of Firefighters (IAFF) Human Relation Committee Report (1992) states "the fire department has the responsibility to counsel all employees...about the potential reproductive risks to themselves and the health risks to their potential offspring." One area of improvement for many department's policies, including BCFR's, would be to provide information on reproductive hazards to all employees at the beginning of their employment. Women in the Fire Service, Inc. (1999a) states "Women firefighters should also be educated early in their careers about the options that exist for them if they become pregnant" (p. 39). They go on further to suggest that "a qualified physician or other professional who is well-versed in the existing research should

conduct classes on this subject for all firefighters and officers.” Currently, Broward County Fire Rescue’s medical director does not play a role in monitoring the division’s pregnancy policy. Involvement of the medical director would also improve the policy.

Summary

The body of literature examined reinforced the study’s research questions. The basis of BCFR’s current policy was formed after considerable examination of the reproductive and legal issues to ensure as sound a policy as possible. The literature reinforces the importance of seeking legal advice to sort through the body of federal laws and legal case opinions. Pregnancy policies are difficult to tailor to the needs of every employee, but it is important to try and limit the aspects of a policy which might discourage participation. The literature strongly supports the value of employee counseling and offers suggestions for improving the current BCFR policy.

PROCEDURES

A literature search was conducted at the Learning Resource Center of the National Fire Academy in January, 2001. A second literature search was conducted at the Broward County Main Library, in Fort Lauderdale Florida in March, 2001. In addition, an on-line search was conducted on the Internet for additional resource material. Finally, the organization Women in the Fire Service, Inc. was contacted and its “Reproductive Safety Information Packet” was provided.

Two surveys were developed in order to both evaluate the existing policy and to make recommendations for improving the policy. The first survey, *Fire Department Survey of Pregnancy Policies*, was designed to gather information from other fire departments concerning their pregnancy policies. The survey was distributed to a sampling of 116 paid professional fire

rescue departments randomly selected without regard to size. The departments were selected from fire departments throughout the state of Florida as well as a random search of fire departments on the Internet. The surveys were mailed with a cover letter, Appendix B, and were requested to be faxed to the author by June 8, 2001. The survey, which is found in Appendix C, consisted of 10 closed-ended questions. The first two questions gathered demographic information on the department. Question 3 determined whether the department had a written pregnancy policy. Questions 4-9 further queried those departments which indicated they did have a policy. Questions 5-8 dealt specifically with the issue of employee counseling. Question 9 requested copies of the department's policies. Question 10 gave the respondents the option of receiving the results of the research. The results of the survey were tabulated quantitatively and analyzed. The results of the fire department survey are tabulated in Appendix D. To preserve anonymity of the respondents, department names were removed from the table. The fire department survey was reviewed by two colleagues for clarity and readability.

The second survey *Survey of Female Firefighters and Paramedics* was distributed to 43 female firefighters and paramedics in the Broward County Fire Rescue Division. This represented the entire population of employees who are eligible to utilize the pregnancy policy. No assumptions were made about the respondents having been pregnant or not during their tenure with the division. The surveys were distributed with a cover letter (Appendix E) through division inter-office mail. Employees returned the surveys either through inter-office mail or via fax. The employee survey, which is found in Appendix F, consisted of 10 closed-ended questions, and two questions which gave the employee the opportunity to offer personal opinions and suggestions for improving the policies. Questions 1 and 2 determined length of employment and number of pregnancies during the employee's tenure. Question 3 determined whether the pregnancy

occurred before or after the implementation of the current pregnancy policy. Questions 4 and 5 applied to those employees who had been pregnant prior to the policy. Questions 6-11 applied to those employees who became pregnant since the implementation of the policy. Question 11 specifically requested a reason for employee's choosing not to participate in the policy. Question 12 allowed all respondents to offer suggestions for improving the existing policy. The results of this survey were tabulated quantitatively and analyzed. The results are found in Appendix G. Due to the variety of responses given to questions 11 and 12, the comments were listed as an attachment to Appendix G. The employee survey was reviewed by a female colleague for question clarity and readability.

Assumptions and Limitations - It was assumed that all respondents to both surveys answered the questions honestly. The first limitation of the Fire Department Survey dealt with the population surveyed. Due to the relatively small sample population, the results of the survey can not be considered truly representative of the United States fire service. It was found upon analyzing the results of the survey that question 7 appeared ambiguous. The question was intended to ask whether the information relating to the hazards of field work was provided to new employees. Based on the responses to question 7, it appears many respondents thought it referred to information about the pregnancy policy in general. In the employee survey, question 3 did not account for those employees who had experienced a pregnancy before *and* after the implementation of the pregnancy policy.

Definitions -

Teratogenic - Causing developmental defects in a fetus.

P.D.A. - Pregnancy Discrimination Act of 1978 - amendment to Title VII of the Civil Rights Act of 1964. Discrimination on the basis of pregnancy, childbirth or related medical conditions

constitutes unlawful sex discrimination. Women affected by pregnancy must be treated in the same manner as other employees with similar limitations.

E.E.O.C - U.S. Equal Employment Opportunity Commission - agency charged with enforcing federal anti-discrimination laws.

B.F.O.Q. - Bona Fide Occupational Qualification - An employer may legally discriminate on the basis of gender if it can be shown that the discriminatory requirement is a legitimate qualification for the job.

Kelly Day - A regularly scheduled shift which the Broward County Fire Rescue employee does not work in order to reduce the average hours worked in a week to 48 hours. Results in five consecutive days off every three weeks.

RESULTS

The results of the literature searches, as well as the survey results, provided the answers to the four research questions. The various fire department pregnancy policies which were received were also very helpful. A quantitative analysis of the two surveys was done and tabulated.

The results of the *Fire Department Survey of Pregnancy Policies* are tabulated in Appendix D .Of the 116 surveys mailed, 88 were returned, representing a 75.8% response rate. The average percentage of female employees represented by all the fire departments responding was 5.4%, slightly higher than the national average of 2.0% Four of the fire departments responding indicated they had no female firefighters (yet one of those did have a written policy). Among the 88 fire departments which responded to the survey, 39 (44.3%) indicated that they did have a written policy for pregnant employees. The results of question 4 revealed that of those

departments that did have a policy, 85% of them have had an employee utilize the policy since its inception. When it came to employee counseling, however, only 15 (38.4%) of the 39 departments with a policy indicated that they conducted employee counseling. Two departments which responded that they did not have a written policy, indicated that they do in fact do some type of employee counseling. Of the 15 departments which do employee counseling, five (33.3%) provide an informational packet, six (40%) conduct one-on-one counseling, and three (20%) offer both types of counseling. (One respondent did not indicate a type of counseling). Seven (46%) of those departments which provide counseling indicated they do provide this information routinely to new hire employees. Ten respondents who do not provide employee counseling responded yes to question #7, however since these ten respondents indicate they have written policies, the assumption is made that they provide new employees with the policy information. This points out the ambiguity of question 7. Of the 15 departments who conduct employee counseling, only three (20%) had a firefighter continue in a field assignment during their pregnancy. By contrast, of the 17 departments which indicated they do not conduct any type of counseling, 6 (35%) had an employee choose to continue working in the field. Thirty-four of the 39 respondents indicated they would provide a copy of their pregnancy policy. Sixty of the 116 departments surveyed (51.7%) requested a copy of these results.

The results of the BCFR Female Employee Survey are tabulated in Appendix G. Of the 43 surveys distributed to all female employees of the division, forty-one were returned. This represented a 95.3% response rate. Of those responding, twenty-two (53.6%) indicated that they had one or more pregnancies while employed with the fire rescue division. Since the introduction of the *Work Continuation Policy for Pregnant Field Personnel*, 10 of those respondents (45 %) have had at least one pregnancy. Remarkably, of the 14 respondents who were pregnant prior to the implementation of the policy, 10 (71.4%) worked through the ninth month of pregnancy. One

worked eight and a half months, and one suffered a miscarriage in the third month. It should be noted that at the time these respondents were pregnant, they were not performing fire suppression duties. Seven of those 14 individuals (50%) indicated that had there been a policy in place at the time of their pregnancy, they would have accepted a light duty assignment. (Two of the 22 respondents had a pregnancy both before and after the implementation of the policy.) Of the 10 women who had the opportunity to utilize the pregnancy policy, six (60%) chose to participate. Three of the six women accepted a light duty assignment during the first trimester. Two others left the field in the second trimester (4th and 6th months). The one remaining participant is a unique case. This respondent was a firefighter who became pregnant and requested a transfer off her fire suppression engine assignment almost immediately. However, she did not want a light duty assignment, but rather requested a transfer to a medical rescue unit. Her request was granted, with approval from her private physician. Unfortunately, the woman went into labor at seven and a half months and delivered prematurely. Remarkably, despite this outcome, the employee indicated a negative response to question # 10 - indicating even if she had received counseling about the reproductive hazards of field work, she still would not have taken a light duty assignment in the first trimester. Four of the six women who participated in the pregnancy policy indicated that they would have chosen light duty in the first trimester if they were fully informed of the hazards earlier.

Research Questions

1. How was the present pregnancy policy developed at Broward County Fire Rescue?

The results of the literature review provided numerous examples of the information which was used to develop the current BCFR pregnancy policy. The foundation of the policy lies in the considerable scientific and medical literature detailing the wide range of reproductive hazards and physical job risks facing the pregnant firefighter. BCFR's *Work Continuation Policy for Pregnant*

Field Personnel policy was developed after extensive research into the federal laws and court rulings relevant to pregnancy and fetal protection issues. The literature examined in this study supports the basic development of the policy. Reviewing other fire department policies provided some interesting results. Some of the policies would seem to indicate that they were developed without careful legal input. Sixteen written department policies specifically required that the employee notify the department as soon as pregnancy is confirmed. Among those departments, eight mandated immediate reassignment to a light duty position.

2. What limitations in the policy have discouraged participation by eligible employees?

As to what aspects of the policy may have discouraged participation, respondents to the employee survey provided considerable input. One of the most prevalent reasons for not accepting a light duty assignment deals with the scheduling. These employees, some of whom were married to other firefighters working twenty-four hour schedule, did not want to be transferred to a 40-hour, five day work week. These employees had other children at home, and child care issues were a consideration with the switch to a 40-hour week. One respondent stated she lived out of the county (in excess of 130 miles) and felt the light duty assignment was an extreme hardship. One respondent's opinion was that often the assignment for light duty was not challenging or rewarding. The same respondent went so far as to suggest that the policy was viewed as punitive, rather than a healthcare consideration. The literature offers suggestions for employers to try to make accommodations that would encourage the employee to accept a light duty assignment.

3. What role does employee counseling play in utilization of the policy?

With regard to the question of what role counseling plays in an employee's decision to

accept a light duty assignment, the results of the *Survey of Fire Department Pregnancies Policies* provides some limited insight. Those departments who conducted employee counseling had fewer employees choose to continue working a field assignment than those departments that conducted no employee counseling. Of course, it is difficult to extrapolate this result to all fire departments, due to the small number of respondents.

The results of the employee survey gave some indication that there would be better participation in the pregnancy policy if information was provided sooner. One respondent felt that there was a lack of understanding of the policy in terms of when it was appropriate to accept a light duty assignment. They felt that more emphasis should be placed on the fact that the first trimester is as risk-prone as the second and third. This respondent felt that having a qualified professional meet with the employee to actually explain the policy and its intent would be beneficial. This would afford the employee the opportunity to ask questions and discuss their individual situation.

Despite the lack of definitive statistical validation of the need for employee counseling, the literature search provides extensive support for counseling.

4. What improvements can be made to insure maximum utilization of the policy?

The results of the literature search suggested several areas of improvement for BCFR's pregnancy policy. Beginning with the area of counseling, the literature supports conducting personal, in-depth counseling of the pregnant employee as to the hazards associated with fire rescue work. The results of the employee survey also indicates that the employees believe the information should be provided sooner, even at the time of hire. Comparing BCFR's policy to a number of department policies received, it is evident that a much more comprehensive risk assessment must be provided to the employee's physician.

The most frequently cited reason for employees not wanting to accept a light duty assignment was the disruption in their work schedule. Firefighters and paramedics who enjoy a Kelly day every three weeks while on the 24-hour schedule are generally very reluctant to give that benefit up. The policy could be improved by identifying alternative light duty work schedules which could accommodate the employee while still offering meaningful productivity for the organization.

In order to improve the utilization of BCFR's *Work Continuation Policy for Pregnant Field Personnel* policy, a draft Operations and Procedures Manual section was developed. The new document incorporates the general guidelines of the current policy, but also includes a Firefighter Risk/Performance advisory. In reviewing the fire department policies received, at least three departments had almost identical policies, which very clearly provide comprehensive hazard information. Policies from the St. Paul (MN), Las Vegas (NV) and Willoughby (OH) fire departments provided language for the Firefighter Risk/Performance Advisory.

DISCUSSION

The evaluation of BCFR's current policy has provided guidance for the organization to take steps to fine tune what is basically a sound policy. The results of the study show that the foundation of the policy, a comprehensive review of reproductive hazards facing pregnant firefighters, was critical to policy development. This is an essential component notes Agnew et al. (1991) "Assessment of the effects of these classes of agents on reproductive outcome is essential to the development of administrative policy options that minimize the risk of adverse reproductive outcome in workers while protecting the employment opportunities of the affected worker" (p. 433). Additionally, the BCFR policy was originally developed with careful

oversight by the county attorney's office. When evaluating the literature related to the legal issues of pregnancy policies, it appears that Broward County's policy meets the standards.

The results indicated an interesting array of policy language regarding the development of other fire departments' pregnancy policies. Among the responding fire departments, the most common questionable policy feature dealt with notification of the department regarding an employee's pregnancy. It was surprising to find departments that in fact mandate reassignment for the pregnant employee. In one very unique case a department requires an employee to go on light duty assignment when she *thinks* she might be pregnant. It would appear that some departments, in the development of their policies, may not have sought adequate legal opinion. Templeton (1992) points out that "many fire departments have responded to the hazards of pregnant firefighters making emergency calls by adopting policies that mandate disclosure of the pregnancy by the member to her supervisor and her temporary removal from field operations" (p. 116). Women in the Fire Service, Inc. notes that in light of the *Johnson Controls* decision policies which mandate a woman leave her firefighting assignment at some arbitrary point in her pregnancy would likely be found illegal (Berkman, 1991). For those fire departments that may try to use the "safety exception" of the BFOQ standard to justify a mandatory reassignment, Templeton warns: "unless you have the time and money to invest in a Supreme Court challenge of the BFOQ defense for the fire service, the most prudent response might be to change your mandatory policy to voluntary" (p.120).

A number of the responding fire departments, conversely, have developed policies which appear to be in compliance with generally accepted legal interpretations. The Richmond (VA) Fire Department's policy specifically states "an employee must not be forced to go on modified or alternative duty or leave at an arbitrary point during a pregnancy (in accordance with the Pregnancy Discrimination Act of 1978.) The policy allows that "when the employee deems it

appropriate she should notify her supervisor after receiving confirmation of pregnancy.” The policy also enumerates the various options available to the employee.

Evaluating the limitations of Broward County Fire Rescue’s policy, the most frequent comment given by respondents to the employee survey is the resistance to changing their shift schedule. While the most common light duty assignment available to employees has been a 40-hour work week, today Broward County Fire Rescue has made efforts to accommodate employee requests. The fire rescue communications branch has a supervisory position which is staffed by a fire rescue officer (generally a captain). What is unique about this position is that it is a 24-hour “swing” shift which covers for the full-time communications captains. A fire rescue captain who is currently pregnant was allowed to work a flexible light duty schedule. She works one 24-hour shift every Sunday, and then works in headquarters two nine hour days during the week. This illustrates the point that Templeton (1992) made about fire chief’s being flexible in their efforts to encourage employee’s accepting light duty assignments.

Women in the Fire Service Inc. (1999b) makes the point that light duty assignments must, in fact, be “non-hazardous” duty, and should be meaningful work that does not penalize the employee.

The St. Paul (MN) Fire department’s policy offers the assurance that “light duty is productive work assignment that utilizes the employee’s skills and abilities and takes into account temporary medical limitations imposed by a qualified medical authority and the St. Paul Fire Department.” This is an area where BCFR has attempted to accommodate employee’s requests. The employees on maternity light duty are generally assigned to a branch of the division where there is some particular interest, such as training or communications.

The importance of employee counseling is clear. In evaluating the results of the employee survey, four respondents indicated that they would have taken a light duty assignment sooner if

they had known all the hazards. Providing comprehensive hazard information to firefighters at the start of their career may encourage them to accept light duty earlier in the pregnancy. In a letter to the union president of Broward County Fire Rescue's IAFF local dated January 27, 1994 Sharon Doyle , Safety & Health Assistant for the International Association of Firefighters, speaks to this point:

Hazard communication should be provided to all fire fighter employees during preplacement and periodic exams. A reproductive hazards program must have a policy or procedure implemented which ensures prompt notification to the occupational health provider that a fire fighter is pregnant. This pregnant female should be given immediate hazard communication addressing the potential reproductive hazards associated with her profession. The fire fighter must be made aware that the most sensitive time of development of the fetus is the first trimester of pregnancy. Spontaneous abortions and teratogenic effects are most likely to occur at this time. By informing the employee that their hazardous job could damage their fetus, any reasonable individual would want to leave a high risk job.

In addition to the lack of personal direct employee counseling, BCFR's policy utilizes a generic medical release form which lists only the most basic job risks. This may have contributed to fewer employees accepting light duty assignments, as it may be easier for the employee to downplay the job hazards to her doctor. In the development of the medical release form, it is important that the firefighters' job responsibilities and work requirements are clearly outlined so that health care providers can knowledgeably certify that the employee can or can not resume work. (Rukavina, 1993)

The implication of the study results for Broward County Fire Rescue is clear. First, the BCFR pregnancy policy may be a victim of its own flexibility. In its effort to avoid any of the

legal pitfalls surrounding the development of such policies, the organization made it extremely easy for the employee to avoid accepting a light duty assignment. One organizational feature that may be somewhat unique to BCFR is the fact that such a large number of the affected employees were strictly paramedics. Several of the employees who chose not to accept a light duty assignment indicated that they felt it was not necessary because they did not engage in firefighting activities. This argument falls short on two levels. First, all fire rescue employees, whether engaged in fire suppression or emergency medical responses are exposed to unacceptable job hazards when pregnant. Second, as the consolidation of Broward County Fire Rescue has progressed over the last decade, the majority of female paramedics have become cross-trained. In the future, only dual-certified firefighter-paramedics will be hired. Thus the clear implication is that the organization must have a policy in place which will provide sufficiently detailed hazard warnings to the employee and her physician.

RECOMMENDATIONS

Broward County Fire Rescue's policy, *Work Continuation Policy for Pregnant Field Personnel*, was developed with concern for the rights of employees, as well as their safety. Unfortunately, the policy did not prove to be as well-received as expected. The results of this research study provide some insight into the limitations of the policy as well as offering immediate recommendations for the organization to improve the policy. One feature of the policy frequently cited by employees as discouraging them from accepting a light duty assignment is the requirement to switch to a 40-hour work week. The fire rescue division should consider alternative light duty assignments which would encourage participation by eligible employees. One immediate recommendation would be to make the communications "swing shift" position

(which is currently being filled by a pregnant fire rescue captain) a permanent alternative duty assignment for those temporarily disabled employees who desire to remain on a 24-hour shift. Despite a few employees who surprisingly indicated that regardless of knowing the hazards ahead of time, they would not have chosen the policy, clearly a better job can be done of counseling the employees. The more comprehensive and descriptive the hazard warnings provided to the employee and the employee's physician, the greater the likelihood that the employee will accept a light duty assignment. This is why it is important that a professional conduct counseling for the employee. Therefore, a recommendation will also be made that the responsibility for employee counseling should be placed with Broward County Fire Rescue's Medical Director. This would ensure consistency and credibility of the counseling message. The final recommendation is for the fire rescue division to incorporate the current *Work Continuation Policy for Pregnant Field Personnel* into its Operating and Procedures Manual, with a complete Firefighter Risk/Performance advisory included. This information would therefore be available to all employees at the time of hire, rather than being held until an employee advises they are pregnant. A draft OPM section has been developed by the author which will be presented to the fire chief for approval. This information is included in Appendix H.

A general recommendation must be made to those future readers whose own department may be struggling with developing a pregnancy policy, or who may have one that they wish to reevaluate. Contacting Women in the Fire Service, Inc. will provide a wealth of valuable information including appropriate sample policy language, as well as summaries of the pertinent federal laws and Supreme Court rulings relevant to pregnancy issues. Finally, enough emphasis can not be placed on the importance of seeking legal review of the policy. This will insure the fairest treatment of the employees, while protecting the department from any potential litigious missteps.

It is further recommended that fire departments examine developing policies which will incorporate broader, gender-neutral reproductive policies. This is an area that is open to additional research. Clearly, there is opportunity for even greater advancement in the area of male *and* female reproductive policies. As society in general appears to be moving toward more liberal family leave policies and benefits, the fire service will need to address challenges such as how the hazards of firefighting affect fertility. In 1989, Gentleman wrote about the cultural implications of many of the changes being faced by fire departments. He wrote “This growing cultural divergence between the fire service and the general public will represent a great challenge to fire service administrators in the future as they attempt to influence their departmental cultures, while meeting an increasing body of state and federal requirements” (p.ii). Surely his words are as relevant to the fire service today as they were twelve years ago.

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APPENDIX A
BROWARD COUNTY FIRE RESCUE DIVISION
GENERAL ORDER # 96-08
1 Page/ One Attachment

SUBJECT: Work Continuation Policy for Pregnant Field Personnel

General Order #96-08 replaces General Order #95-11, which was previously issued July, 24, 1995

The division recognizes that the pregnant fire rescue employee has a right to continue to work without being subjected to the associated hazards of field duty positions. It is further understood that the pregnant employee may, at some point, be rendered temporarily unable to effectively perform normal fire suppression or rescue duties.

The following procedures, will therefore be followed:

1. The employee is encouraged, but not required, to inform the division director or his designee when confirmation of pregnancy is made.
2. The employee shall be offered information on the known and potential hazards associated with fire rescue field activities and pregnancy and shall sign a medical assessment form acknowledging receipt of such information. The division shall provide the employee with a copy of this information which the employee may give to her physician. The division shall maintain all originals as confidential medical records, and copies shall be provided for the employee.
3. The employee shall be offered a non-combat, alternative duty assignment for the duration of the pregnancy. The employee may, however, choose to maintain her current field position for as long as she is capable of performing all job duties.
4. Any questions regarding the employee's fitness for field duty shall be based upon observed performance deficiencies or problems and shall be decided by the employee's physician, with due regard for the safety of the employee, the child, and other affected crew members. The County may require a medical release form from the employee's physician as a condition for permitting the employee to remain in a field assignment and may require consultation with a county physician.
5. Upon return to duty, the employee shall be reassigned to the field position held prior to the pregnancy.

Effective Date: May 15, 1996
Issue Date: April 30, 1996

Issued _____
Director

BROWARD COUNTY FIRE RESCUE MEDICAL ASSESSMENT FORM

Please read carefully and complete this form.

This is to certify that _____ Title _____
has been under my care since _____ for _____
(condition, injury, or illness)

- A. Division paramedics and firefighters are required to continually maintain physical fitness and be prepared to participate physically in any duties required to control all types of emergency fire and/or rescue operations. Full duty tasks and functions include:

For All Personnel:

1. Lift repeatedly weights of 50+ pounds.
2. Work for long hours without sleep.
3. Carry patients and/or equipment.
4. Be exposed to chemical agents, heat stress, bloodborne pathogens and contagious diseases.
5. Drive emergency vehicles on city streets, interstate highways through heavy traffic under emergency conditions with red light and sirens.

For Personnel with Fire Suppression Duties:

6. Pull heavy hose lines up two or three flights of stairs.
7. Be exposed to heat, cold and wet clothing.
8. Climbing ladders and operating from heights.

Is the current condition of the firefighter/ paramedic such that they are able to fully function in all of the above capacities ?

Yes _____ No _____

(Over)

If no, which area(s) is limited, and what is the limiting factor(s)?

- B. Is the current condition of the employee such that they are able to function in a limited-duty capacity?

Yes_____ No_____

If no, when do you anticipate release to limited-duty?

If yes, please date and sign release to limited-duty.

_____ Date_____

When do you anticipate release to full-duty?

Signature

Date

Address

Phone